

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>Am</i>	<i>896</i>	<i>1/3</i> <i>01/11/01</i>
RESPONSE FORMALITY REVIEW	<i>gch</i>	<i>1030</i>	<i>5-22-01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 +- ..... Restricted      O ..... Objected

Claim	Date
Final	
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Claim	Date
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If more than 150 claims or 10 actions  
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